



Attorney Docket No. F-5727 (1417P P 590)

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re U.S. Patent Application Of:
Kok-Hwee Ng, et al.

Application No. 09/864,926

Confirmation No. 1675

Filed: May 24, 2001

For: SYSTEM AND METHOD FOR
AUTOMATING THE WORKFLOW
IN A BLOOD COLLECTION FACILITY

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) Group Art Unit: 2166
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) Examiner: Unassigned
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**TRANSMITTAL OF SUPPLEMENTAL
INFORMATION DISCLOSURE STATEMENT — NO. 12**

Mail Box Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. 1.97 and 1.98, Applicants submit herewith Form PTO-1449, "Supplemental Information Disclosure Statement - No. 12," and a copy of the references listed therein.

The Examiner is requested to consider carefully the complete text of the enclosed references in connection with the examination of this application. It is requested that the listed references be made of record and included in the "References Cited" portion of any patent issuing from this application.

Since this Statement is being filed before the mailing date of a first Official Action on the merits, no fee is necessary. Please charge any fee associated with this Communication to our Deposit Account No. 23-0280.

Respectfully submitted,

Dated: August 25, 2004

By: James P. Muraff
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Attorney for Applicants

CERTIFICATION UNDER 37 C.F.R. § 1.10

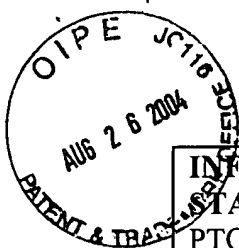
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Date of Deposit: August 26, 2004

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service, postage prepaid, under 37 C.F.R. § 1.10 on the date indicated above and is addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Gillian Gardner
Gillian Gardner (195953)



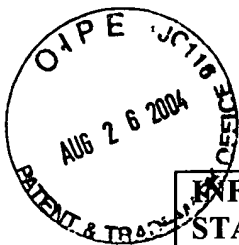
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Application No.: 09/864,926
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Art Unit: 2166
Examiner Name: Unassigned
Attorney Docket Number: F-5727 (1417P P 590)

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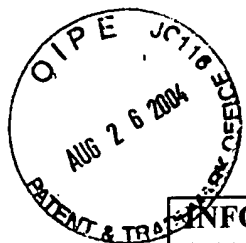


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listed item(s). References marked as asterisk " * "



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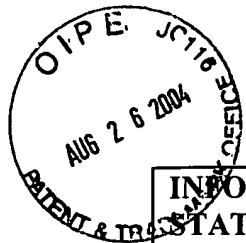


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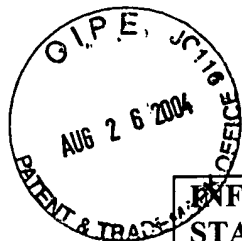


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EXAMINER SIGNATURE: _____ DATE CONSIDERED: _____

Examiner: Initial if citation considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.

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